

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 107092512	FILING DATE				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1							61					
2							62					
3							63					
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50												
TOTAL IND.	4						TOTAL IND.					
TOTAL DEP.	28						TOTAL DEP.					
TOTAL CLAIMS	32						TOTAL CLAIMS					

PTO 1340 (2-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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